



Housing Location and Stability Scenario Quick Guide

QUICK GUIDE OVERVIEW

Accurately documenting Veteran information pertaining to housing location and stability is a critical component to ensuring quality service delivery and providing insight into program outcomes. This Quick Guide includes fabricated scenarios and frequently asked questions (FAQs) to assist in understanding how and when to document a Veteran's housing location and stability and to assist in correcting data discrepancies, ensuring accuracy of Veteran information for improved service delivery, coordination across programs, and accurate resource allocation.

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SCENARIOS

PROGRAM ENTRY

A Veteran is in the hospital and is discharging to a Residential Treatment (RT) Program (Grant and Per Diem (GPD) Program, Health Care for Homeless Veterans (HCHV) Contract Emergency Residential Services (CERS), or HCHV Low Demand Save Haven (LDSH)):

A Veteran is discharging from an inpatient medical unit. The Veteran recently relocated from another state, and prior to the relocation, was permanently housed by one of the previous site's homeless programs. When the Veteran relocated, they stayed in a motel that they paid for but cannot go back, as they cannot continue to afford independently paying for the motel room. The Veteran does not have sufficient resources or support networks immediately available to prevent them from becoming literally homeless post-hospital discharge. A full HOMES Assessment Interview is completed, as the previous HOMES episode is closed (i.e., VA services ended more than 30 days ago). Since the Veteran was in the hospital prior to the day of the assessment, it would be <u>inaccurate</u> to document that the Veteran is in a motel; the <u>accurate</u> response to item 20 (Where was the Veteran residing prior to today/the night before the assessment?) is "Hospital or other residential non-psychiatric medical facility." It would also be <u>inaccurate</u> to document item 24 (housing stability) on the HOMES Assessment as "Literally homeless." The Veteran is unstably housed/atrisk of losing housing due to exiting the hospital soon. If "Literally homeless" is documented on item 24 of the HOMES Assessment, the Veteran will erroneously show as a return to homelessness because of the permanent housing placement (PHP) by the previous site.

A Veteran exits an institution, and the community provider directly admits the Veteran to their GPD RT Program:

The Homeless Program receives notification from a community provider that a Veteran was admitted to and entered RT five days ago. Prior to the RT entry, the Veteran was in jail for 60 days. The Veteran does not have an open HOMES episode, so the VA Liaison must complete a full HOMES Assessment Interview, Referral, and GPD Entry Form. The VA Liaison must accurately document the Veteran's housing arrangement prior to entry in the HOMES Assessment and GPD Entry Form; therefore, it would be inaccurate to document on the HOMES Assessment or on the GPD Entry Form that the Veteran's housing arrangement prior to assessment or entry was "GPD Transitional Housing." The accurate response would be, "Prison or jail." To determine the Veteran's housing stability (item 24 of the HOMES Assessment), the VA Liaison must first determine where the Veteran was staying immediately prior to jail. The Veteran reports that they were staying in an emergency shelter prior to jail and stayed in jail for less than 90 days, so the Veteran's housing stability on assessment is "Literally homeless." There must also be documentation of progress notes within the electronic health record (EHR), regardless of the Veteran's healthcare eligibility status, which must also align with the information documented in HOMES.

A Veteran has a Housing and Urban Development-VA Supportive Housing (HUD-VASH) voucher and is in HUD-VASH housing but enters an RT Program for 90 days:

A Veteran with a HUD-VASH voucher and in HUD-VASH housing is working diligently with their HUD-VASH case manager on treatment plan goals. The Veteran has signed releases of information so that the HUD-VASH case manager can advocate on the Veteran's behalf to aid in the complex care coordination between the Public Housing Authority (PHA) and landlord, so that the Veteran can maintain their voucher and housing while admitted to RT for 90 days. The HUD-VASH case manager refers the Veteran to RT. The RT Program enters the Veteran; however, the VA Liaison documents that the Veteran is in "GPD Transitional Housing" as the housing arrangement prior to entry (item 5). This is <u>inaccurate</u> because the





Veteran was in "Housing rented by Veteran, with HUD-VASH voucher" the night before RT entry. Although the Veteran is entering RT, the Veteran's housing status does not change and is not a return to homelessness because of continuous engagement with Homeless Programs. The HUD-VASH case manager does no need to exit the Veteran from the HUD-VASH Program and does not need to update the Housing Progress Form (HPF) while the Veteran is in RT because the HUD-VASH voucher and housing are retained. When the Veteran completes treatment, the RT Exit Form is documented to reflect that the Veteran's housing arrangement (item 3) is "Housing rented by Veteran with HUD-VASH voucher" and is "Stably housed" (item 5).

A Veteran owns their home but is facing foreclosure and is referred to and enters an RT Program (GPD, HCHV CERS or HCHV LDSH):

A Veteran presents to a homeless walk-in clinic at the VA medical center (VAMC) and tells the staff that they are there to get some help because they are homeless for the first time. An HCHV social worker greets the Veteran and explains their role to the Veteran. Since the Veteran has not engaged in any VA Homeless Programs, the social worker adds the Veteran to HOMES so that an assessment can be completed. When the Veteran describes their housing situation, they report to be homeless. The social worker asks open-ended questions and determines that the Veteran resided in housing that they owned prior to today but lost their job about nine months ago, so they have not made a mortgage payment in almost eight months. Although the Veteran is reporting to be homeless, when the social worker documents the response about the Veteran's housing status (item 24), "Literally homeless" is not selected because of where the Veteran slept prior to today. The Veteran is at imminent risk of losing housing, as evidenced by the foreclosure notice that indicates the house is being foreclosed on within 10 days of today's date. The Veteran has not identified another subsequent residence and lacks the resources or support networks to obtain other permanent housing. The HCHV social worker coordinates with RT, and the Veteran accepts the referral and enters the program.

A Veteran is in the Supportive Services for Veteran Families (SSVF) Program but is being evicted from their apartment so is referred to and enters a GPD RT Program:

A Veteran is permanently housed by SSVF Rapid Rehousing (RRH); however, the Veteran receives a formal eviction notice. The Veteran presents to the VAMC homeless walk-in clinic and is seen by one of the Homeless Program GPD Liaisons. According to the court-ordered eviction, the Veteran has three days to vacate the unit. No subsequent residence has been identified, and the Veteran lacks the resources or support networks to obtain other permanent housing. The Veteran has reached the SSVF Program assistance limit for additional temporary financial assistance (TFA), so the SSVF Program did not pay for this month's rent and will be exiting the Veteran from the program. The Veteran does not have an open HOMES episode, so a full HOMES Assessment Interview is completed. The Veteran stayed in their apartment last night; however, is no longer receiving an SSVF RRH subsidy. On the HOMES Assessment, the Veteran's housing location (item 20) is documented as "Housing rented by Veteran, no ongoing housing subsidy" and the housing stability (item 24) is documented as "At imminent risk of losing housing." The Veteran is accepted to and enters GPD, with the GPD Entry Form (item 5) correctly documenting that the Veteran was in "Housing rented by Veteran, no ongoing housing subsidy" the night prior to program entry. Through case conferencing and collaboration with the SSVF grantee, the SSVF case manager is informed of the Veteran entering a GPD Program. The SSVF grantee documents the destination (HMIS data element ID, 3.12) in HMIS as "Transitional housing for homeless persons (including homeless youth)."





PROGRAM EXIT

A Veteran exits an RT Program (GPD, HCHV CERS or HCHV LDSH) to permanently live with family but is being evicted and re-admitted to an RT Program:

A Veteran exits an RT Program to live permanently in a family member's house; therefore, is permanently housed. About four months later, the Veteran calls their former VA case manager to report that they cannot stay with their family member and are going to be homeless again, as the family member has filed an eviction. Since the Veteran no longer has an open HOMES episode, a full HOMES Assessment Interview is completed. The VA case manager documents <u>accurately</u> that the Veteran is now "Staying or living with family, temporary tenure." Although the living arrangement with family was planned to be permanent, it is now temporary since the family member has filed a court-ordered eviction. The VA case manager starts to <u>inaccurately</u> document on the HOMES Assessment (item 24) that the Veteran is "Literally homeless," so would have <u>inaccurately</u> counted the Veteran as a return to homelessness. The VA case manager catches their HOMES documentation error before submitting and changes item 24 to "Imminent risk of losing housing." Although the Veteran can no longer permanently reside with family, the Veteran is not literally homeless yet, but rather at imminent risk of losing housing, as evidenced by the court-ordered eviction that the Veteran's family filed, giving the Veteran seven days to vacate.

A Veteran exits an RT Program (GPD, HCHV CERS or HCHV LDSH) and is permanently housed by the SSVF Program while awaiting a HUD-VASH voucher:

A chronically homeless Veteran is exiting an RT Program through SSVF RRH. Because the Veteran is chronically homeless, awaiting a HUD-VASH voucher, and will be co-enrolled in the SSVF Program, the VA Liaison is concerned about how to document the RT exit so that the Veteran does not lose their chronically homeless status. The VA Liaison is unsure how to document the housing arrangement (item 3) and the Veteran's housing stability (item 5) on the RT Exit Form. The housing location needs to accurately reflect where the Veteran will be living at time of exit and reflect the actual status at time of exit. The Veteran will not lose their chronically homeless status while housed by the SSVF Program through RRH Progressive Engagement. The VA Liaison documents on the RT Exit Form that the Veteran's housing arrangement (item 3) is "Housing rented by Veteran, with non-HUD-VASH housing subsidy" with the specific subsidy type documented as "SSVF Rapid Rehousing (RRH) or equivalent RRH subsidy." The VA Liaison documents that for housing stability (item 5), the Veteran is "Stably housed." The HUD-VASH case manager then updates the Veteran's Housing Progress Form (HPF) to indicate the date housed by the SSVF RRH subsidy. The remaining items on the HPF are updated in real-time as they occur (e.g., date Veteran moved into HUD-VASH housing is when the HUD-VASH subsidy begins and the SSVF RRH subsidy ends).

A Veteran exits an RT Program (GPD, HCHV CERS or HCHV LDSH) to live with friends temporarily and is shortly thereafter hospitalized:

A Veteran exits an RT Program and states that they plan to relocate to a different state next month to live with their sister, but in the meantime, will reside with friends temporarily until they can save a month or two of their income. Since the Veteran exits RT to stay with friends temporarily, the Veteran is not permanently housed nor is the Veteran stably housed. The RT Exit Form should reflect the housing arrangement at exit (item 3) as "Staying or living with friends, temporary tenure" and should reflect the housing stability at exit (item 5) as "Unstably housed/at-risk of losing housing." About a week after the RT exit, the Veteran is admitted to an inpatient psychiatric unit. Since the Veteran was residing with friends temporarily prior to the hospital admission, the Veteran is not homeless, but rather unstably housed/at-risk of losing housing. A new HOMES Assessment is not needed as the Veteran exited RT less than 30 days ago; therefore, the





HOMES episode is still open. The Veteran does not have sufficient resources or support networks immediately available to prevent them from becoming literally homeless, post-hospital discharge. The Veteran is referred to and enters RT post-hospital discharge. The RT Entry Form accurately documents the Veteran's housing location as "Psychiatric hospital or other psychiatric facility" since this is where the Veteran was staying prior to RT entry. While in RT, the Veteran works on treatment plan goals to include a successful relocation to another state where their sister resides. The RT case manager helps coordinate the Veteran's transfer of care, including coordination with the receiving site's Homeless Program for a GPD case management referral, as the Veteran will be temporarily residing with their sister until permanent housing is obtained.

A Veteran is exiting HCHV CERS and will be permanently housed by the SSVF Program:

The HCHV Outreach Team engages with a Veteran who has been staying with friends or at a bus stop for the last month. A full HOMES Assessment Interview is completed, and the Veteran reports that they slept at the bus stop last night; therefore, the Veteran's housing location (item 20) is documented as "Place not meant for habitation (e.g., vehicle, an abandoned building, bus/train/subway station/airport, or anywhere outside)," and the housing stability (item 24) is documented as "Literally homeless." Through the Veteran By-Name List (BNL), Coordinated Entry System, and case conferencing, the HCHV Outreach Team is made aware that the Veteran goes to the Emergency Department and is admitted for about 10 days to a non-VA detox center. While in the non-VA detox center, the Veteran accepts a referral to an HCHV CERS Program and immediately enters following discharge from the detox center. On the RT Entry Form, the housing location prior to program entry (item 5) is documented as "Non-VA substance abuse treatment facility or detox center." A HOMES Assessment is not needed, as the HOMES episode is still open from the assessment that was completed less than 30 days ago. The Veteran is still considered literally homeless because the Veteran was staying in a place not meant for human habitation immediately prior to entering the detox center and stayed in the detox center for less than 90 days. While in HCHV CERS, the Veteran is referred to the SSVF Program to assist with the transition into permanent housing. The Veteran obtains permanent housing and successfully completes the HCHV CERS Program. The RT Exit Form documents the Veteran's housing location (item 3) as "Housing rented by Veteran, with non-HUD-VASH housing subsidy" with the specific subsidy type documented as "SSVF Rapid Rehousing (RRH) or equivalent RRH subsidy)" and the housing stability (item 5) is documented as "Stably housed." The SSVF grantee documents the prior living situation (HMIS data element ID, 3.917) in HMIS as "Emergency shelter, including hotel or motel paid for with emergency shelter voucher, or RHY-funded Host Home shelter."

HUD-VASH CASE MANAGEMENT AND SSVF PROGRAM CO-ENROLLMENT

A Veteran exits an institution to SSVF Emergency Housing Assistance and is referred to and enters HUD-VASH Case Management:

The HCHV Coordinated Entry Specialist (CES) and HCHV Outreach Coordinator engage with an unsheltered, chronically homeless Veteran at the local soup kitchen but could not complete a full HOMES Assessment. Shortly thereafter, through the Veteran BNL case conferencing, the HCHV CES learns that the Veteran is incarcerated. The Veteran is in jail for approximately 80 days and, when released, presents to the Homeless Patient Aligned Care Team (HPACT) Clinic and re-engages with Homeless Programs. Since the Veteran does not have an open HOMES episode, a full HOMES Assessment Interview is completed. The Veteran was staying on the streets immediately prior to going to jail and stayed in jail for less than 90 days; therefore, the Veteran is still homeless. The Veteran's housing arrangement the night before the assessment (item 20) is documented as "Prison or jail," and the housing stability (item 24) is





documented as "Literally homeless." The HCHV CES coordinates with the SSVF Program, and the Veteran is accepted to Emergency Housing Assistance and goes to a hotel, as suitable transitional housing is not currently available to the Veteran through GPD, HCHV, and the community. The HCHV CES also refers the Veteran to the HUD-VASH Program. When the Veteran enters HUD-VASH Case Management a few days later, the HUD-VASH Entry Form is <u>accurately</u> documented by the HUD-VASH Program that the Veteran is in an "Emergency shelter (ES), including hotel or motel paid for with emergency shelter voucher" prior to program entry (item 4).

A Veteran is co-enrolled in HUD-VASH Case Management and the SSVF Program. The Veteran is exiting SSVF Rapid Rehousing (RRH) now that the Veteran has received their HUD-VASH voucher:

A Veteran is co-enrolled in HUD-VASH Case Management and the SSVF Program, as there are not any voucher resources immediately available, but the SSVF Program has the capacity to provide housing navigation services and TFA. The HUD-VASH Program continues to provide clinical care related to the health and behavioral health needs of the Veteran while coordinating and collaborating with the SSVF grantee through case conferencing and transition planning. The Veteran obtains permanent housing through SSVF RRH while awaiting their HUD-VASH voucher and PHA housing inspection. The HUD-VASH case manager updates the HPF to document the date housed by SSVF RRH. The SSVF Program TFA includes a security deposit and rental assistance. When the Veteran receives their HUD-VASH voucher and the unit passes inspection, the HUD-VASH case manager updates the HPF to document the voucher and housing status updates. The SSVF grantee documents the destination (HMIS data element ID, 3.12) in HMIS as "Rental by client with VASH housing subsidy." The Veteran continues engagement with the HUD-VASH Program through the appropriate stage of case management, as clinically appropriate.

FAQs

What is a HOMES Assessment and when should I complete one?

The HOMES Assessment Interview captures the Veteran's needs and status at the beginning of the HOMES episode, at the point of initial engagement with VA Homeless Program services. When there is a break in services for more than 30 days, a new Assessment must be completed to re-engage the Veteran in services.

The Assessment consists of two parts: The Pre-Engagement Screening and the Full Assessment Interview. The Pre-Engagement section of the Assessment is a brief assessment of a Veteran's needs. It is usually conducted if the Veteran is unable to complete a Full Assessment Interview or has no interest in participating in any programs at that time. The Pre-Engagement Screening is also completed in instances when a VA clinician has a very brief encounter with a homeless Veteran in a community setting in which a full Assessment is not feasible (e.g., soup kitchen, shelter, or Stand Down). The HOMES episode remains closed if only the Pre-Engagement section of the Assessment is completed.

The Assessment documents an interview conducted with a homeless Veteran to determine the best course of action for program referrals and integration of services. It is conducted in a semi-structured interview format intended to collect the Veteran's demographic information as well as data on military history, living situation, employment, financial status, and clinical status. It also contains a clinical impressions section, in which the interviewer notes their treatment concerns and recommendations.

All information documented in the Assessment should reflect the Veteran's status at the point of initial engagement in VA Homeless Program services. If the Assessment cannot be documented timely (within 30 days), please contact the HOMES Help Desk for assistance.





What if I am late on my HOMES documentation and am unable to complete the assessment, referral, and entry?

For late HOMES documentation (more than 30 days), please submit a HOMES Help Desk Ticket so that the HOMES Support Team can provide guidance on next steps. For reference, the HOMES Correction Policy and Reporting Policy can be found on the <u>HOMES Main Page</u>. If you need additional information on using the HOMES Help Desk, step-by-step instructions can be found in the <u>Help Desk User Quick Guide</u>.

Am I supposed to document progress notes for healthcare ineligible Veterans in the EHR?

Yes; documentation entered in HOMES must align with the information in the Veteran's EHR. VA Homeless Program Stop Codes do not bill Veterans for services, regardless of a Veteran's healthcare eligibility, so documenting in the EHR using clinics built with the corresponding and appropriate Homeless Program Stop Code is required.

How do I document Veterans that need to return to HUD-VASH Case Management?

The process for documenting a return to HUD-VASH Case Management depends on the voucher and housing statuses. When a Veteran re-enters case management with the same voucher and housing, a HOMES Help Desk Ticket will need to be submitted so that the HOMES Support Team can remove the HUD-VASH Exit Form and treat this as a continuous episode of care; a new episode/entry is not needed. If the Veteran's housing or voucher status has changed since the time of program exit (i.e., no longer using the same voucher and in the same housing location), you will need to add a new HOMES Assessment to capture the Veteran's status at the time of program re-entry. Once the assessment is completed, add a new referral and complete the Entry Form as of the date of program re-entry. When you complete the HPF, be sure to select "No" to the question: "Does the Veteran's current HUD-VASH case management episode retain housing from a previous HUD-VASH episode?" If you need additional information on using the HOMES Help Desk, step-by-step instructions can be found in the Help Desk User Quick Guide.

What are some examples of housing locations that could be considered as stably housed?

For the definitions of "imminent risk of losing housing" and "unstably housed/at-risk of losing housing," please refer to the <u>HOMES Data Definitions</u>. If the Veteran's housing situation and circumstances do <u>not</u> meet the definition of being at imminent risk of losing housing or unstably housed/at-risk of losing housing, the Veteran would likely be considered stably housed. The following are some examples of housing locations that would be considered as stably housed:

- Housing owned by Veteran, no ongoing housing subsidy;
- Housing owned by Veteran, with ongoing housing subsidy;
- Housing rented by Veteran, no ongoing housing subsidy;
- Housing rented by Veteran with HUD-VASH voucher;
- Housing rented by Veteran with non-HUD-VASH housing subsidy.

Specify subsidy type:

- Mainstream (non-HUD-VASH) Housing Choice Voucher
- Public Housing Unit, such as housing fully funded or subsidized by HUD.
- SSVF Rapid Rehousing (RRH) or equivalent RRH subsidy
- Other subsidized housing, including locally-funded subsidized housing;
- Permanent housing for formerly homeless persons (such as: CoC Project or S+C);
- Staying or living with family, permanent tenure;
- Staying or living with friends, permanent tenure;
- GPD transitional housing Transition in Place (TIP)





What makes a living situation with family or friends permanent?

If the Veteran is living with friends or family, permanent tenure, it is expected that the Veteran will reside permanently in the friend or family member's room, apartment or house. Examples include:

- Veteran states they have a key to the unit and will remain on a lease or utility bill.
- Veteran recently reunited with family and will be living with them long-term.
- Veteran plans to move-in a shared unit with a sibling, partner, or friend.
- Two Veterans connected in the program and obtained housing together, with clear plans to remain in the unit long-term.

This does not include situations where the Veteran is staying with friends/family until they are able to secure other independent housing, even if there is not a clear end date identified. Please note that this definition applies within VA to HOMES documentation.

A Veteran is behind on rent but has not received an eviction notice from their landlord. Is this Veteran considered to be at imminent risk of losing housing?

No, this Veteran is not at imminent risk of losing housing because the Veteran has not yet received a formal eviction notice or an imminent homelessness date. The Veteran would be considered "unstably housed."

What are some examples of housing locations that could be considered as literally homeless?

For the full definition of "literally homeless," please refer to the <u>HOMES Data Definitions</u>. The following are some examples of housing locations that could be considered as literally homeless:

- GPD transitional housing;
- Non-VA transitional housing for homeless persons;
- VA contracted residential treatment programs (HCHV Contract Residential Services);
- Safe Haven (SH);
- Emergency Shelter (ES), including hotel or motel paid for with emergency shelter voucher;
- Place not meant for habitation (e.g., a vehicle, an abandoned building, bus/train/subway station or anywhere outside)

Please note that if a Veteran is in an emergency shelter, Safe Haven, or a place not meant for human habitation immediately before entering an institution and is released or discharged from the institution after 90 days or less, the Veteran is still considered literally homeless.

What if a Veteran resides in an emergency shelter, Safe Haven, or place not meant for human habitation immediately before entering an institution and is in the institution for longer than 90 days?

If a Veteran stays in an emergency shelter, Safe Haven, or place not meant for human habitation immediately before entering an institution and is exiting the institution after more than 90 days, the Veteran's housing stability immediately upon release or discharge is no longer considered "Literally homeless" but rather "Unstably housed/at-risk of losing housing" because they were in the institution for over 90 days.

When a Veteran exits an RT Program and goes to an institution, what should be documented as their housing stability on the RT Exit Form?

If a Veteran exits from an RT Program to an institution for an unknown length of time, and there is not a housing arrangement plan post-release or discharge from the institution, the Veteran's housing stability at exit from RT is "Literally homeless."

If the Veteran exits from an RT Program to an institution for a known length of time, and there is a plan to address the Veteran's housing arrangement post-release or discharge, the Veteran's housing stability at exit from RT is "Unstably housed/at-risk of losing housing."





When would a Veteran in an institution be considered as stably housed?

If a Veteran is entering an institution and in permanent housing immediately prior, the Veteran is stably housed upon entry. If the Veteran is exiting from that institution without any changes to the prior permanent housing arrangement, or if there is a realistic plan for permanent housing at exit, the Veteran will be considered stably housed upon release or discharge from the institution. Veterans in institutions long-term, without an imminent release date would also be considered as stably housed, since there is not a present risk of homelessness while in the institutional setting. The Veteran's housing location can be updated in the "Current Housing Status" section of the Housing and Employment Tracker (HET) in HOMES. For additional instructions on using the HET, please refer to the HET Quick Guide.

What do I do if the housing location (item 20) or housing stability (item 24) of the HOMES Assessment needs to be corrected?

If the housing location (HOMES Assessment, item 20) is incorrect, submit a ticket to the HOMES Help Desk to correct the HOMES Assessment and include supporting documentation from the Veteran's clinical note in the EHR.

If the housing stability is incorrect (HOMES Assessment, item 24), submit a ticket to the Help Desk to correct the housing stability response. Since item 24 will be updated to align with the response in item 20, supporting documentation from the EHR is not required; however, please note that corrections to item 24 must align with the current response to the Veteran's housing location at the time of assessment (item 20) or will require supporting documentation from the Veteran's clinical note in the EHR to confirm the correct housing location at assessment.

What do I do if the housing location or the housing stability on a HOMES Exit Form needs to be corrected?

If the housing location on a HOMES Exit Form is incorrect, submit a ticket to the HOMES Help Desk to correct the HOMES Exit Form and include supporting documentation from the Veteran's clinical note in the EHR.

If the housing stability on a HOMES Exit Form is incorrect, submit a ticket to the Help Desk to correct the housing stability response. Since the housing stability will be updated to align with the housing location, supporting documentation from the EHR is not required; however, please note that corrections to housing stability must align with the current response to the Veteran's housing location at the time of exit or will require supporting documentation from the Veteran's clinical note in the EHR to confirm the correct housing location at exit.

What do I do if the housing location on a HOMES Entry Form needs to be corrected?

If the housing location on a HOMES Entry Form is incorrect, submit a ticket to the HOMES Help Desk to correct the HOMES Entry Form and include supporting documentation from the Veteran's clinical note in the EHR.

What if a Veteran relocates after being permanently housed and is documented as a return to homelessness by the new VAMC?

The return to homelessness is tied to the site where the initial permanent housing placement was credited, regardless of which site documents the return. To ensure appropriate coordination of care for the Veteran, please reach out to the new VAMC. For a list of points of contact for each VAMC, please refer to the Homeless Program VISN, VAMC, and Facility Leads Contact List.





What if a Veteran is a return to homelessness but gets re-housed on their own?

If a VA Homeless Program learns that a Veteran has resolved their homelessness and obtained permanent housing on their own (e.g., housing rented by Veteran, no ongoing housing subsidy), a clinical progress note is completed in the EHR, and the Veteran's housing location is updated in the "Current Housing Status" section of the HET in HOMES. For additional instructions on using the HET, please refer to the HET Quick Guide.

Can updates be made to exit forms if a Veteran obtains permanent housing after exiting from a program?

If a VA Homeless Program learns that a Veteran is in a permanent housing location after exiting from a program, a clinical progress note is completed in the EHR, and the Veteran's housing location is updated in the "Current Housing Status" section of the HET in HOMES. Corrections would only be applied to exit forms if there is documentation in the EHR confirming that the Veteran's housing location on the night of program exit was documented incorrectly. For additional instructions on using the HET, please refer to the HET Quick Guide.

QUESTIONS

For assistance resolving HMIS discrepancies, please contact SSVF grantees directly. For assistance resolving HOMES record discrepancies, please submit a ticket to the HOMES Help Desk, available on the <u>HOMES Main Page</u>. Within each ticket, be sure to specify the Veteran's name and HOMES ID. For additional support, please contact HPO's Business Intelligence Team.